

HOUSE No. 1935**The Commonwealth of Massachusetts**

PRESENTED BY:

Kay Khan

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act relative to mental health services in Massachusetts correctional institutions, houses of correction and jails.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Kay Khan	11th Middlesex
Patricia D. Jehlen	Second Middlesex
Barbara A. L'Italien	18th Essex
Elizabeth A. Malia	11th Suffolk
Benjamin Swan	11th Hampden
Frank I. Smizik	15th Norfolk
John W. Scibak	2nd Hampshire
Timothy J. Toomey, Jr.	26th Middlesex
Ruth B. Balser	12th Middlesex
James B. Eldridge	Middlesex and Worcester
Ellen Story	3rd Hampshire
Willie Mae Allen	6th Suffolk
Sarah K. Peake	4th Barnstable
Jennifer M. Callahan	18th Worcester
Susan C. Tucker	Second Essex and Middlesex
Thomas M. Stanley	9th Middlesex
Cleon H. Turner	1st Barnstable
Brian P. Wallace	4th Suffolk

Susan C. Fargo

Third Middlesex

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE HOUSE, NO. 1887 OF 2007-2008.]

The Commonwealth of Massachusetts

In the Year Two Thousand and Nine

AN ACT RELATIVE TO MENTAL HEALTH SERVICES IN MASSACHUSETTS CORRECTIONAL INSTITUTIONS, HOUSES OF CORRECTION AND JAILS.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority
of the same, as follows:*

1 SECTION 1. Chapter 126 of the General Laws, as appearing in the 2000 Official Edition, is
2 hereby amended by inserting, after section 27, the following new section:

3 Section 28. Mental Health Examinations and Services.

4 The sheriff shall ensure that each person admitted to a county correctional facility, including a
5 house of correction or jail, shall have access to mental health care consistent with his or her
6 needs. Mental health care shall include but not be limited to suicide screening, mental health and
7 substance abuse screening upon admission or transfer to a facility; mental health assessment
8 within two weeks of admission or transfer and periodically thereafter; a comprehensive mental
9 health evaluation within a time frame appropriate to the level or urgency; suicide prevention;
10 crisis intervention; an individualized plan of care; psychiatric services, including medication and
11 medication monitoring; individual and group psychotherapy; evaluation for transfer to a mental
12 health facility; and discharge planning, including referral to appropriate mental health services at

the time of release and sufficient medication for continued treatment until enrollment in a public or private health plan.

a. Each such correctional facility shall comply with the principles and guidelines of the current version of the American Psychiatric Association Task Force Report on Psychiatric Services in Jails and Prisons, or such higher standards as the sheriff may require, with respect to the provision of mental health care.

b. The department of mental health shall inspect each such correctional facility at least annually to determine compliance with this section. The commissioner of mental health shall make a report of the findings and any recommendations from each inspection to the sheriff, including any recommendations for revisions to the standards for the provision of mental health care.

c. The sheriff shall require in each such correctional facility training of administrative, health care, and correctional staff including but not limited to the symptoms of chronic and persistent mental illnesses such as major depression, bipolar disorder, obsessive compulsive disorder, schizophrenia, and Borderline Personality Disorder; the medications used to treat these illnesses, the side effects of the medications, the types and causes of self-mutilation and strategies for dealing with mentally ill inmates in crisis. The sheriff shall develop protocols for said training in cooperation with the commissioner of mental health.

d. The commissioner of mental health shall file an annual report of its inspections of mental health care in county correctional facilities for the prior year, including any recommendations, with the secretary of public safety, the secretary of health and human services, the commissioner of corrections, each sheriff, the house and senate committees on ways and means, the joint

committee on health care financing, the joint committee on mental health and substance abuse and the legislative mental health caucus.

SECTION 2. Chapter 127 of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by inserting, after section 17, the following new section:

Section 17A. Mental Health Examinations and Services.

The commissioner shall ensure that each person admitted to a state correctional facility shall have access to mental health care consistent with his or her needs. Mental health care shall include but not be limited to suicide screening, mental health and substance abuse screening upon admission or transfer and periodically thereafter; a comprehensive mental health evaluation within a time frame appropriate to the level of urgency; suicide prevention; crisis intervention; an individualized plan of care; psychiatric services, including medication and medication monitoring; individual and group psychotherapy; evaluation for transfer to a mental health facility; and discharge planning, including referral to appropriate mental health services at the time of release and sufficient medication for continued treatment until enrollment in a public or private health plan.

a. Each such correctional facility shall comply with the principles and guidelines of the current version of the American Psychiatric Association Task Force Report on Psychiatric Services in Jails and Prisons, or such higher standards as the sheriff may require, with respect to the provision of mental health care.

b. The department of mental health shall inspect each such correctional facility at least annually to determine compliance with this section. The commissioner of mental health shall make a

55 report of the findings and any recommendations from each inspection to the sheriff, including
56 any recommendations for revisions to the standards for the provision of mental health care.

57 c. The commissioner shall require in each such correctional facility training of administrative,
58 health care, and correctional staff including but not limited to the symptoms of chronic and
59 persistent mental illnesses such as major depression, bipolar disorder, obsessive compulsive
60 disorder, schizophrenia, and Borderline Personality Disorder; the medications used to treat these
61 illnesses, the side effects of the medications, the types and causes of self-mutilation and
62 strategies for dealing with mentally ill inmates in crisis. The commissioner shall develop
63 protocols for said training in cooperation with the commissioner of mental health.

64 d. The commissioner of mental health shall file an annual report of its inspections of mental
65 health care in state correctional facilities for the prior year, including any recommendations, with
66 the secretary of public safety, the secretary of health and human services, the commissioner of
67 correction, each sheriff, the house and senate committees on ways and means, the joint
68 committee on health care financing, the joint committee on mental health and substance abuse
69 and the legislative mental health caucus.